

10/17/01

JC904 U.S. PTO

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PTO/SB/05 (11-00)

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09/982315

10/17/01

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	200116.403D1
	First Inventor	Horst Fischer
	Title	COMPOSITIONS AND METHODS FOR CYSTIC FIBROSIS THERAPY
	Express Mail Label No.	EL897872760US

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages <u>44</u> ] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	a. <input checked="" type="checkbox"/> Computer Readable Form (CRF) b. <input checked="" type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> paper c. <input checked="" type="checkbox"/> Statements verifying identity of above copies	
4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>  </u> ]	<b>ACCOMPANYING APPLICATION PARTS</b>	
5. Oath or Declaration [Total Sheets <u>3</u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement [Power of Attorney (when there is an assignee)]	
	11. <input type="checkbox"/> English Translation Document (if applicable)	
	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations]	
	13. <input checked="" type="checkbox"/> Preliminary Amendment	
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) Should be specifically itemized	
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
	16. <input type="checkbox"/> Request and Certification under 35 U.S.C. Applicant must attach form 122(b)(2)(B)(i). PTO/SB/35 or its equivalent.	
	17. <input checked="" type="checkbox"/> Other. <u>Application Data Sheet</u>	

18. If a CONTINUING APPLICATION OR APPLICATION CLAIMING FOREIGN PRIORITY, check appropriate box, and supply the  
requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) ☒ Claims priority from application  
No. 09/174,077

Prior application information

Examiner Howard Owens, Jr.Group Art Unit: 1623For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or  
declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or  
divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a  
portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Correspondence address below		or: <input checked="" type="checkbox"/> Customer Number or Bar Code Label	
Firm Name			 <b>00500</b> PATENT TRADEMARK OFFICE
Address			
City, State, Zip			
Country			
Telephone	Fax		
Name (Print/Type)	James M. Verna	Registration No. (Attorney/Agent)	33,287
Signature		Date	October 17, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount  
of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND  
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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision

## Complete if Known

Application Number  
Filing Date **October 17, 2001**  
First Named Inventor **Horst Fischer and Beate Illek**  
Examiner Name  
Group Art Unit  
Attorney Docket No. **200116.403D1**

TOTAL AMOUNT OF PAYMENT (\$) **1131.00**

## METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number

**19-1090**

Deposit  
Account  
Name

**Seed Intellectual Property Law Group PLLC**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 and credit any overpayment to Deposit Account Number above.  
☒ Applicant claims small entity status See 37 CFR 1.27

2. ☒ Payment Enclosed.

☒ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	<b>370</b>
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)					<b>(\$ 370)</b>

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
<b>33</b>	-20** = <b>13</b>	X <b>9</b>	= <b>117</b>
Independent Claims	<b>15</b>	-3** = <b>12</b>	X <b>42</b>
Multiple Dependent		X <b>140</b>	= <b>140</b>

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$ 761)**

\*\*or number previously paid, if greater, For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity		Small		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\$)**

## SUBMITTED BY

Name (Print/Type) **James M. Verna** Registration No **33,287**  
Firm Name/Address  
Signature *James M. Verna* Date **October 17, 2001**



**00500**

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